227	FILED/EFFECTIVE
CERTIFICATE OF ASSUMED BUSINESS N Pursuant to Section 53-504, Idaho Code, the u submits for filing a certificate of Assumed Busin Please type or print legibly. NOTE: See instructions on reverse before	NAME Indersigned ness Name. U2 APR -2 AM 9: 59 STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of business is: 	
Eric Hove.	Complete Address 3167 N Town Ridge Rol Lidden Springs 1083703
 3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 	er the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West
Jan Hove <u>13167 N Town Ridge Rd</u> <u>Hidden Springs 1D 8370</u> 3 5. Name and address for this acknowledgment	PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
COPY IS (if other than # 4 above):	208/229-1530
Signature: Dan Hove	Secretary of State use only
Printed Name: <u>S. Jan Hove</u> Capacity/Title: <u>Owner</u> (see instruction # 8 on back of form)	$D \ 53519$ IDAHO SECRETARY OF STATE 04/02/2002 05 = 00 CK: 1852 CT: 158810 BH: 456280 1 2 20.00 ASSUM NAME # 2